

STATEMENT OF ECONOMIC INTERESTS

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FAIR POLITICAL PRACTICES COMMISSION
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TN

CITY OF LA QUINTA
CITY CLERK'S OFFICE

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NAME OF FILER

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2013 APR -4 PM 2:01

(MIDDLE)

ADOLPH

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7

1. Office, Agency, or Court

Agency Name

CITY OF LA QUINTA

Division, Board, Department, District, if applicable

Your Position

MAYOR

► If filing for multiple positions, list below or on an attachment.

Agency:

Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☒ City of LA QUINTA

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2012, through December 31, 2012.

-or-

The period covered is / / , through December 31, 2012.

☐ Leaving Office: Date Left / / (Check one)

☐ The period covered is January 1, 2012, through the date of leaving office.

☐ The period covered is / / , through the date of leaving office.

☐ Assuming Office: Date assumed / /

☐ Candidate: Election year and office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 2

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5.

I have used all reasonable diligence in preparing this statement. I have signed and sworn to the truth of the information herein and in any attached schedules is true and complete. I acknowledge that I am subject to the penalties of perjury under the laws of the State of California.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and complete.

Date Signed

1/18/13

(month, day, year)

(File the originally signed statement with your filing official.)

SCHEDULE D
Income - Gifts

Name

D. D. Arroyo

▶ NAME OF SOURCE (Not an Acronym)

PERE CHRISTIAN ACADEMY

ADDRESS (Business Address Acceptable)

40700 Yucca Ln, DEQUITA JONES

BUSINESS ACTIVITY, IF ANY, OF SOURCE

CHRISTIAN EDUCATION

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

3 / 3 / 12 \$ 150.00 DINNER

 / / \$

 / / \$

▶ NAME OF SOURCE (Not an Acronym)

CITY OF INDIAN WELLS

ADDRESS (Business Address Acceptable)

44-950 EL Dorado, INDIAN WELLS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

CITY GOVT.

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

3 / 14 / 12 \$ 200 TENNIS MATCH
ENTRANCE

 / / \$

 / / \$

▶ NAME OF SOURCE (Not an Acronym)

BURRIEC WASTE

ADDRESS (Business Address Acceptable)

41-575 Eclectic, PALM DESERT

BUSINESS ACTIVITY, IF ANY, OF SOURCE

WASTE RECHOP

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

9 / 6 / 12 \$ 150.00 DINNER

 / / \$

 / / \$

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

 / / \$

 / / \$

 / / \$

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

 / / \$

 / / \$

 / / \$

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

 / / \$

 / / \$

 / / \$

Comments: _____